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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Michael J. Stevenson

SER. NO.

10/058,257

FILED:

January 29, 2002

TITLE:

SURFACING OF POLYOLEFIN OBJECTS WITH

ANTIMICROBIAL MATERIALS

UNIT:

1732

EXAMINER: Monica A. Fontaine

## RESPONSE TO FEE DEFICIENCY NOTICE

THE COMMISSIONER FOR PATENTS MAIL STOP AMENDMENT P.O. Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

In the matter of the above-identified application, enclosed is payment for the deficiency in fees for the above-identified application. A copy of the Notice of Fee Deficiency is also enclosed with a fee transmittal form.

July 20, 2005

Robert E. Strauss

Reg. No. 19364

CERTIFICATE OF MAILING

The undersigned hereby certifies that this correspondence has been deposited on July 21, 2005 with the U.S. Postal Service first class postage prepaid and addressed to:

THE COMMISSIONER FOR PATENTS MAIL STOP AMENDMENT

P.O. Box 1450, Alexandria, Virginia 22313-1450

Robert E. Strauss

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trauentians Office, U.S. Patent and Trauentians Office, U.S. Patent and Trauentians Office, U.S. Decrease of OMB control number of Security (1995) and the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE W. W. st. Effective on 12/08/2004. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/058,257 TRANSMIT Filing Date 01/29/2002 For FY 2005 First Named Inventor STEVENSON, Michael J. **Examiner Name** Monica A. Fontaine Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1732 TOTAL AMOUNT OF PAYMENT 50.00 Attorney Docket No. **STEV-113** METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES** Small Entity **Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 200 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 **Provisional** 200 100 0 0 Λ 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims **Extra Claims** Multiple Dependent Claims Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets **Extra Sheets** Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) (round up to a whole number) x / 50 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): FEE DEFICIENCY NOTICE-Excess Claims \$ 50.00 SUBMITTED BY Registration No. Signature Telephone 928 541-7574 (Attorney/Agent) Name (Print/Type) Robert E. Strauss Date 07/20/2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



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UNder Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office Washington, DC 20231

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## NOTICE OF FEE DEFICIENCY

The info	ormality regarding the payment of the fee is indicated below in connection with
	the original filing of the application and/or preliminary amendment (e.g. additional claim fees)
X	the reply filed on because of the following matter(s). See 37 CFR 1.111 and 37 CFR 1.135.
]	FEE(S) DUE
	<ol> <li>The reply (e.g., amendment) is considered incomplete in that the funds in Deposit Account No.</li> <li>are insufficient to cover the entire fee due. The balance* is due within the time period set below.</li> </ol>
<u> </u>	2. The reply (e.g., amendment) is considered incomplete in that the Credit Card payment to cover the entire fee due
	Account (Card type + last 4 digits ONLY) was refused.  lance' is due within the time period set below.
ill	3. The reply (e.g., amendment) has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account or Credit Card) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the time period set below.
区	4. The filing fee of \$ submitted in this application is insufficient.  A balance of \$ 50,00 is due for presentation of excess claims (37 CFR 1.16(b) & (c)).
	5. Other.
	Explanation (Provide specific details of the required correction in order to assist the applicant. Indicate whether a service has been added to the fee due):
OFT	ICANT IS GIVEN A TIME PERIOD OF <b>ONE (1) MONTH or THIRTY (30) DAYS</b> FROM THE MAILING DATE HIS <b>NOTICE</b> , WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FET OF A IN ORDER TO DABANDONMENT. EXTENSIONS OF THIS TIME PERIOD MAY BE GRANTED UNDER 37 CFR 1.136.
(37 CI REPI	INDICATED AMOUNT OF THE FEE(S) DUE IS SUBJECT TO CHANGE YEARLY ON OCTOBER 1 FR 1.16 & 1.21). THE <b>AMOUNT OF THE FEE(S) DUE IS DETERMINED AS OF THE DATE A COMPLETE</b> L <b>Y IS RECEIVED BY THE OFFICE</b> (37 CFR 1.8 & 1.10). BECAUSE THE AMOUNT DUE IS NOT NECESSARILY FEE INDICATED ABOVE, IT IS RECOMMENDED THAT APPLICANT CHECK THE CURRENT FEE SCHEDULE CH IS POSTED ON THE USPTO'S WEBSITE AT: http://www.uspto.gov/web/offices/ac/qs/ope/fees.htm
"unpa	ice Charges: There is a \$50 service charge for processing each payment refused (including a check returned hid") or charged back by a financial institution (37 CFR 1.21(m)). There is a \$25.00 service charge for each month the balance of a deposit account is below \$1000 at the end of the month (37 CFR 1.21(b)(2)).
Legal	Instruments Examiner (LIE) or Clerk of Group
Inquir	res regarding this Notice should be addressed to the above at $\frac{57/-272-1026}{}$ (insert Phone Number).